

## Electronic Patent Application Fee Transmittal

|  |  |                 |               |                             |
|--|--|-----------------|---------------|-----------------------------|
| <b>Application Number:</b>                     | 09637923   |                 |               |                             |
| <b>Filing Date:</b>                            | 14-Aug-2000  |                 |               |                             |
| <b>Title of Invention:</b>                     | METHOD AND APPARATUS FOR TREATING SUBCUTANEOUS HISTOLOGICAL FEATURES |                 |               |                             |
| <b>First Named Inventor/Applicant Name:</b>    | Robert Bruce Spertell  |                 |               |                             |
| <b>Filer:</b>                                  | Thomas D. Kohler/Karen Jeffer  |                 |               |                             |
| <b>Attorney Docket Number:</b>                 | 13406-017USD1  |                 |               |                             |
| Filed as Small Entity                          |  |                 |               |                             |
| <b>Utility under 35 USC 111(a) Filing Fees</b> |  |                 |               |                             |
| <b>Description</b>                             | <b>Fee Code</b>  | <b>Quantity</b> | <b>Amount</b> | <b>Sub-Total in USD(\$)</b> |
| <b>Basic Filing:</b>                           |  |                 |               |                             |
| <b>Pages:</b>                                  |  |                 |               |                             |
| <b>Claims:</b>                                 |  |                 |               |                             |
| <b>Miscellaneous-Filing:</b>                   |  |                 |               |                             |
| <b>Petition:</b>                               |  |                 |               |                             |
| <b>Patent-Appeals-and-Interference:</b>        |  |                 |               |                             |
| <b>Post-Allowance-and-Post-Issuance:</b>       |  |                 |               |                             |
| <b>Extension-of-Time:</b>                      |  |                 |               |                             |

| Description                             | Fee Code | Quantity | Amount | Sub-Total in USD(\$) |
|---|----------|----------|--------|----------------------|
| <b>Miscellaneous:</b>                   |          |          |        |                      |
| Request for continued examination       | 2801     | 1        | 405    | 405                  |
| Submission- Information Disclosure Stmt | 1806     | 1        | 180    | 180                  |
| <b>Total in USD (\$)</b>                |          |          |        | <b>585</b>           |